	in this information to identify your ca									
	otor 1 Shanita D. O	uting								
	otor 2									
Unit	ted States Bankruptcy Court for the:	EASTERN DISTRICT	OF PENNSYLVANIA							
Cas (If kn	e number 20-10679						ed filing ent showing			
Of	ficial Form 106l						as of the follo	owing date.		
	chedule I: Your Inco	me AMENDE	ח			MM / DD/ Y	YYYY		12/1	
supp spou	s complete and accurate as possolying correct information. If you use. If you are separated and you ch a separate sheet to this form. On the complex to the	are married and not filing r spouse is not filing with	ng jointly, and your s th you, do not includ	spouse i de inforr	s livi natio	ing with you, incl on about your spe	ude informa ouse. If more	tion about e space is	your needed,	
1.	Fill in your employment		D. ()			Dobton	Dalidar O annua (Illiana			
	information. If you have more than one job, attach a separate page with information about additional employers.		Debtor 1 Figure Employed				Debtor 2 or non-filing spouse Employed			
		Employment status	☐ Not employed				☐ Not employed			
		Occupation	A/R Specialist							
	Include part-time, seasonal, or self-employed work.	Employer's name	Acclara Solutions, LLC							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed th	nere?							
Par	Give Details About Mon	thly Income								
spou If you	mate monthly income as of the da use unless you are separated. u or your non-filing spouse have mo	ore than one employer, co							-	
						For Debtor 1	For Debt			
2.	List monthly gross wages, salar deductions). If not paid monthly, o	ry, and commissions (be calculate what the monthly	efore all payroll y wage would be.	2.	\$	2,667.98	\$	N/A		
3.	Estimate and list monthly overti	me pay.		3.	+\$	0.00	+\$	N/A		
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	2,667.98	\$	N/A		

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Shanita D. Outing	-	Case	number (if known)	20-106	3 79	
	Con	y line 4 here	4.	For	Debtor 1 2,667.98		ebtor 2 or iling spouse N/A	
5.		-	т.	Ψ—	2,007.90	<u> </u>	N/A	
5.		all payroll deductions:	50	\$	200.04	¢	NI/A	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$ \$	389.94 0.00	\$	N/A N/A	
	5c.	Voluntary contributions for retirement plans	5c.	^ψ —	0.00	\$——	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e.	Insurance	5e.	\$_	167.40	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify: A.D.D.	5h.+	\$	0.70	+ \$	N/A	
		Accident		\$	13.10	\$	N/A	
		Life Insurance		\$	0.90	\$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	572.04	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,095.94	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	400.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	<u> </u>	0.00	\$	N/A	
	8e.	Social Security	8e.	<u>\$</u> —	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	400.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,495.94 + \$_		N/A = \$ 2.	,495.94
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your rifiends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend				hedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						,495.94
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?				Combined monthly in	
	V	Yes. Explain:						